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COMMITTEE INFORMATION (required):

Committee Information:	Committee Name:	LOZANO FOR SUPERIOR COURT JUDGE
	Chairperson's name	e Jorge Lozano
	Treasurer's name:	Jorge Lozano
TE INFORMATION (only if f	iling as a candidate com	mittee):
Office Sought:	■ County Office:	Yuma County Superior Court Judge
	District (if applicable	le): 6
	District (if applicable	le): 6

REPORTING PERIOD (check one):

_	REPORTING PERIOD	REPORT DUE
	2016 4th Quarter Report: November 5, 2016 to December 31, 2016	January 1, 2017 to January 15, 2017
	2017 March Pre-Election Report (Local Only): January 1, 2017 to February 25, 2017	February 26, 2017 to March 4, 2017
	2017 1st Quarter Report (Local Only): February 26, 2017 to March 31, 2017	April 1, 2017 to April 15, 2017
L	2017 1st Quarter Report: January 1, 2017 to March 31, 2017	April 1, 2017 to April 15, 2017
	2017 2 nd Quarter Report: April 1, 2017 to June 30, 2017	July 1, 2017 to July 15, 2017
	2017 3 rd Quarter Report: July 1, 2017 to September 30, 2017	October 1, 2017 to October 15, 2017
	2017 4 th Quarter Report: October 1, 2017 to December 31, 2017	January 1, 2018 to January 15, 2018
	2018 1 st Quarter Report: January 1, 2018 to March 31, 2018	April 1, 2018 to April 15, 2018
	2018 2 rd Quarter Report: April 1, 2018 to June 30, 2018	July 1, 2018 to July 15, 2018
	2018 August Pre-Election Report: July 1, 2018 to August 11, 2018	August 12, 2016 to August 18, 2018
\checkmark	2018 3 rd Quarter Report: August 12, 2018 to September 30, 2018	October 1, 2018 to October 15, 2018
	2018 October Pre-Election Report: October 1, 2018 to October 20, 2018	October 21, 2018 to October 27, 2018
	2018 4 th Quarter Report: October 21, 2018 to December 31, 2018	January 1, 2019 to January 15, 2019
	Misc. Pre-Election Report: (1 st day of quarter to 17 th day before election): Reporting Period:to Reporting Jurisdiction: Date of Election:	(reporting period end to 10 th day before election) Report due:to

FINANCIAL SUMMARY (required):

Activity	Cash Activity This Reporting Period	Election Cycle to Date
(a) Committee value at the beginning of this reporting period (i.e. ending balance from the previous reporting period)	\$2,500	\$2,500
(b) + Total receipts (from "Summary of Receipts," line 13 (cash column) for this reporting period)	\$0	\$2,500
(c) - Total disbursements (from "Summary of Disbursements," line 15 (cash column) for this reporting period)	\$2,376.25	\$2,376.25
(d) = Balance at close of reporting period	\$123.75	\$123.75

Committees with financial activity must file the cover page, summary of receipts, summary of disbursements, and any schedules that contain financial activity.

All reports are deemed to be filed under penalty of perjury by the committee treasurer (all committees) and candidate (candidate committees only).



SUMMARY OF RECEIPTS (Schedule A):

	Receipts	Cash	Equity
1. I	Monetary Contributions Received		
(a) Individuals - More than \$50	\$0	\$2,500
(b) Individuals - \$50 or Less (Aggregate)	0	0
(c) Candidate Committees	0	0
(d) Political Action Committees	0	0
(e) Political Parties	0	0
(f) Partnerships	0	0
(g) Corporations & Limited Liability Companies (PACs & Political Parties Only)	0	0
	h) Labor Organizations (PACs & Political Parties Only)	0	0
) Candidate's Personal Monies (Candidate Committees Only)	0	0
) Monetary Contributions Subtotal (add 1(a) through 1(i))	0	0
	k) Refunds Given Back to Contributors	0	0
		· · · · · · · · · · · · · · · · · · ·	
	Net Monetary Contributions (subtract 1(k) from1(j)) oans	\$0	\$2,500
	a) Loans Received	0	0
	b) Forgiveness on Loans Received	0	0
(c) Repayment on Loans Made	0	0
(d) Interest Accrued on Loans Made	0	0
(e) Loans Subtotal (cash; add 2(a), 2(c) & 2(d))	0	The Prince of the Park State o
3. F	Rebates and Refunds Received	0	0
4. 1	nterest Accrued on Committee Monies	0	0
5. li	n-Kind Contributions Received	0	STREET, THE RESERVE WIT
(2	a) Individuals - More than \$50	0	0
(1	n) Individuals - \$50 or Less (Aggregate)	0	0
(0	c) Candidate Committees	0	0
(0	1) Political Action Committees	0	0
(6	e) Political Parties	0	0
<u>(</u> f) Partnerships	0	0
(ç	Corporations & Limited Liability Companies (PACs & Political Parties Only)	0	0
(n) Labor Organizations (PACs & Political Parties Only)	0	0
(i) Candidate's Personal Assets or Property (Candidate Committees Only)	0	0
(i) In-Kind Contributions Subtotal (equity: add 5(a) through 5(i))	0	0
6. lr	n-Kind Donations Received (Non-Contributions) (Political Parties Only)	0	0
	xtensions of Credit	0	0
(:	a) Extensions of Credit Received	0	0
(1	Payments on Extensions of Credit Received	0	0
(0	c) Net Extensions of Credit (subtract 7(b) from 7(a))	0	0
8. J	oint Fundraising / Shared Expense Payments Received	0	0
9 P	ayments Received for Goods / Services	0	0
10. C	outstanding Accounts Receivable / Debts Owed to Committee	0	0
	ransfer In Surplus Monies / Transfer Out Debt (use cash and/or equity as applicable)	0	0
	iscellaneous Receipts	0	0
	otal Receipts (cash: add 1(l), 2(e), 3-4, 8-9, 11-12; equity: add 2(b), 5(j), 8-7, 10-12)	\$0	\$2,500



SUMMARY OF DISBURSEMENTS (Schedule B):

	Disbursements	Cash	Equity
1.	Disbursements for Operating Expenses	\$2,376.25	\$0
2.	Contributions Made	0	0
	(a) Candidate Committees	0	0
	(b) Political Action Committees	0	U
	(c) Political Parties	0	0
	(d) Partnerships	0	0
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)	0	0
	(f) Labor Organizations (PAC & Political Parties Only)	0	0
	(g) Monetary Contributions Subtotal (add 2(a) through 2(f))	0	0
	(h) Contribution Refunds Provided to the Reporting Committee	0	0
	(i) Monetary Contributions Total (subtract 2(h) from2(g))	0	0
3.	Loans	0	0
	(a) Loans Made	0	0
_	(b) Loan Guarantees Made	TWO ISSUED TO THE THE PARTY.	0
	(c) Forgiveness on Loans Made	0	0
	(d) Repayment of Loans Received	0	
	(e) Accrued Interest on Loans Received	0	0
	(f) Total Loans (cash: add 3(a), 3(d) & 3(n); equily: add 2(b) &2(c))	0	0
4.	Rebates and Refunds Made (Non-Contributions)	0	
5.	Value of In-Kind Contributions Provided	0	0
	(a) Candidate Committees	0	0
	(b) Political Action Committees	0	0
	(c) Political Parties	0	0
	(d) Partnerships	0	0
	(e) Corporations & Limited Liability Companies (PAC & Political Parties Only)	0	0
_	(f) Labor Organizations (PAC & Political Parties Only)	0	0
	(j) Contributions Subtotal (add 5(a) through 5(f))	0	
6.	Independent Expenditures Made		0
7.		0	0
8.	Ballot Measure Expenditures Made Recall Expenditures Made	0	0
		0	0
9. 10.	Support Provided to Party Nominees (Political Parties Only) Joint Fundraising / Shared Expense Payments Made	0	
11.	Reimbursements Made	0	0
12.		0	0
-	Outstanding Accounts Payable / Debts Owed by Committee	0	0
13.	Transfer Out Surplus Monies / Transfer In Debt (use cash and/or equity as applicable) Miscellaneous Disbursements		0
14.		0	0
10.	Total Disbursements (cash: add 1, 2(i), 3(f), 6-11 & 14; equity: add 3(f), 5(j), & 12-14)	\$2,376.25	0



MONETARY CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - MORE THAN \$50 DURING ELECTION CYCLE:*

SCHEDULE A(1)(a)

		ributor Informatio	on .	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name D/O		Date Contribution Received			-"
	n/a					\$2,500
	Street Address			 	0	
1	City State		ZIP		•	
	Cony	Sizie				
	Occupation	Employer				
⊢	Name		Date Contribution Received			
	Street Address		<u> </u>			
2	Сиу	State	ZIP			
	Occupation	Employer	<u> </u>			
	Name	•	Date Contribution Received	-		···
	Sireel Address					
3	City	State	ZIP			
			!			
	Occupation	Employer				
	Name	Date Contribution Received				
	<u> </u>					
	Street Address					
4	City	State	ZIP			
				į		
	Occupation	Employer				
_						
	Name		Date Contribution Received			
				1		
	Street Address			ŀ		
5			 -			
٦	City	State	ZIP		I	ľ
	-					
	Occupation	Employer				
		<u> </u>				
	Enter total only if last page of schedule (transfer total to "Swimmary of Receipts." line 1(a))				0	\$2,500

*If contributions of \$50 or less are listed on Schedule A(1)(b), do not include them on Schedule A(1)(a).

Schedule A(1)(a), page___of ___



MONETARY CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - \$50 OR LESS (AGGREGATE):*

SCHEDULE A(1)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Cumulative Contributions from Individuals - \$50 or Less	0	0
Enter total only if last page of schedule (transfer total to "Summary of Receipts," line 1(b))	0	0

MONETARY CONTRIBUTIONS FROM CANDIDATE COMMITTEES:

SCHEDULE A(1)(c)

	Candidate Committee	e Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	none				0	0
	Street Address					
1	City	State	ZIP			
	Committee ID Number	Date Contribution Receiv	ed			
Н	Committee Name					
ľ						
	Street Address					
2	City	State	17/0			
		State	ZIP			
	Committee ID Number					
	Committee ID Humber	Ommittee ID Number Date Contribution Received				
_	Committee Name	<u></u>				
	Committee Name					
	Street Address					
3						
	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	bd			
		<u></u>				
	Committee Name					
					1	
	Street Address					
4	Сиу	State	ZIP			
	Committee ID Number	Date Contribution Receive	xd			
				ľ		
Ī	Committee Name		<u> </u>			
	street Address			1		
5	City	State	ZIP			
	Committee ID Number	Date Contribution Receive	<u> </u>			
		Sale Continuents Left 6460				
\dashv	Enter total only if last page of schedule					
	(transfer total to "Summary of Receipts," line 1(c))				0	0

Schedule A(1)(c), page___of ___

MONETARY CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(1)(d)

none 0	ion Cycle
Street Address	
1 City State ZIP	
Committee ID Number Date Contribution Received	
Committee Name	·
Street Address	
2 City State ZIP	
Committee ID Number Date Contribution Received	
Committee Name	_
Street Address	
3 City State ZiP	
Committee ID Number Date Contribution Received	
Committee Name	
Street Address	
4 City State ZIP	
Committee ID Number Date Contribution Received	
Committee Name	
Street Address	
5 City State ZIP	
Committee ID Number Date Contribution Received	
DETO CONTINUED IN COLORES	
Enter total only if last page of schedule (transfer total to 'Summary of Receipts,' sine 1(d))	0

Schedule A(1)(d), page___of ___

MONETARY CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(1)(e)

	Political Party Co	entributor Informa	tion	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	none	none			0	0
	Street Address					
1	City	State	ZIP	1		
	Committee ID Number Date Contribution Received			1		
Г	Committee Name	<u> </u>				
	Street Address	-		1		
2	City	State	ZIP			
	Committee IO Number	ID Number Date Contribution Received				
	Committee Name					
	Street Address					
						ı
3	City	State	ZIP	i		
	Committee ID Number	Date Contribution Receive	ed			
i	Committee Name					
	Street Address					
					ľ	
4	City	State	ZIP			
	Committee ID Number	Uniter Date Contribution Received			- 1	
	Committee Name					
	Street Address	Street Address				
5						
Ĭ	City	State	ZIP			
				ľ		
	Committee ID Number	Date Contribution Receive	đ			
_						
	Enter total only if last page of schedule				0	0
_	(transfer total to "Summary of Receipts," line 1(e))					~

Schedule A(1)(e), page___of ___

MONETARY CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(1)(f)

			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	Partnership Name				0	0
		none				0
	Street Address					
L						
1	City	State	ZIP			
	Corporation Commission File Number Date Contribution Received				i	
				!		
\vdash	Partnership Name					
	Street Address					
2	City	State	710			
	Cny	State	ZIP			
	Companying Companying File Mountain	0.0.7.5				
	Corporation Commission File Number	Date Contribution Receive	ed			
	Partnership Name					
	Street Address					
١						
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	nd			
	Partnership Name					
	7-2					
	Street Address					
	Varia.	530				
4	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	d			
	- Constitution Colored	Date Continuinal Necesses				
_	Partnership Name	<u></u>			-	
	Street Baldings					ľ
	Street Address					
5		<u> </u>				i
	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	d			
	Enter total only if last page of schedule				0	0
	transfer total to "Summary of Receipts," line 1(f))		v	U		

Schedule A(1)(f), page___of ___



2018-07

MONETARY CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(1)(g)

_	Corporation / LLC	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					0
	Street Address					
1	Спу	State	ZIP			
	Corporation Commission File Number Date Contribution Received					
Г	Corporation/LLC Name					
	Street Address					
2	Сяу	State	ZIP			
	Corporation Commission File Number Date Contribution Received					
	Corporation/LLC Name					
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	nd .			
	Corporation/LLC Name					
	Corporational Co. Name					!
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number Date Contribution Received					
	Corporation*LC Name					
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	d			
	Enter total only if last page of schedule transfer total to "Summary of Receipts," line 1(g))				0	0

Schedule A(1)(g), page___of ___



ONETARY CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(1)(h)

	Labor Organization	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Labor Organization Name					0
	Street Address					
1	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ad			
	Labor Organization Name	<u> </u>				
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ed			
	Labor Organization Name					
	Street Address					
3	Спу	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	ad .			
	Labor Organization Name					
	Street Address					
4	Спу	State	ZIP			
	Corporation Commission File Number Date Contribution Received					
	Labor Organization Name					
	Street Address					
5	Сйу	State	ZIP			
	Corporation Commission File Number	Date Contribution Receive	d			
	Enter total only if last page of schedule				0	0

Schedule A(1)(h), page___of ___



MONETARY CONTRIBUTIONS FROM CANDIDATE'S PERSONAL MONIES:

SCHEDULE A(1)(i)

_		e Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ĺ	Name		Date Contribution Received			0
	Shart Addison					U
ŀ	Street Address				i	
1	City	State	ZIP			
	Occupation	Employer	<u> </u>			
Н	Name		Date Contribution Received			
	Street Address					
2	City	State	ZIP			
	Occupation	Employer				
_						
3	Name		Date Contribution Received			
	Street Address					
	Сйу	State	ZIP			
	Occupation	Employer				
				J	ľ	
	Name		Date Contribution Received			
	Street Address					
_						
4	City	State	ZIP			
	Occupation	Employer				
_	N					
	Name		Date Contribution Received			
	Circal Address				i	
	Street Address					
5	City	State	ZIP		Į.	
	Occupation	Employer				
	Enter total only if last page of schedule		. <u>.</u> I		0	
	(transfer total to "Summary of Receipts," line s(ii)					0

Schedule A(1)(i), page___of ___

REFUNDS GIVEN BACK TO CONTRIBUTORS:

SCHEDULE A(1)(k)

	Contributo	or Information		Amount Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	-	Date Contribution Refunded			0
	Street Address		<u> </u>	-		١٥
1	City	State	ZIP	1		
	IO Number (if applicable)		Date of Original Contribution			
L						
	Name		Date Contribution Refunded			
	Street Address	<u>.</u>	<u></u>	-		
2	City	State	ZIP	1		
		<u></u>				
	ID Number (if applicable)		Date of Original Contribution			
⊢	Name		Date Contribution Refunded		-	-
			Date Commoduly Returned			
	Street Address			i		
				ļ		
3	City	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			
_	Name		Date Contribution Refunded			_
	Street Address					
4			·-			
4	City	State	ZIP			
	ID Number (if applicable)		Date of Original Coatribution			
	ID Number (if applicable)		Date of Original Contribution			
	Name		Date Contribution Refunded			
	Seta Contribution (Califolis)					
	Street Address					
5		_				
Ĭ	Cny	State	ZIP			
	ID Number (if applicable)		Date of Original Contribution			ľ
	Enter total only if last page of schedule					
	(transfer total to "Summary of Receipts," line 1(k))		0	0		

Schedule A(1)(k), page____of ____

LOANS RECEIVED:

SCHEDULE A(2)(a)

	Lender	Information		Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name	Date Loan Received				
	Strant Address	Street Address				0
	Ottors Pouloss					
1	City	State	ZIP			
	Guarantor/Endorser Name		(PACs and Political Parties Only)			
L	Lender Name		<u> </u>			
	Leave Name	Date Loan Received				
	Street Address					
_						
2	City	State	ZIP			
	Guarantor/Endorser Name					
	Guaranton entoriser Name	Non-Electoral Purpose? (PACs and Political Parties Onty)				
_	Lender Name	Date Loan Received				
	Street Address					ı
3						
J	Сйу	State	ŻΙΡ			
	Guarantor/Endorser Name	Non-Electoral Purpose? (PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Street Address		i			
4	City	State	ZIP			
	, ,	o late				
	Guarantor/Endorser Name	Non-Electoral Purpose? (I	PACs and Political Parties Only)			
	Lender Name	Date Loan Received				
	Steamt årldrage					
	Street Address					
5	City	State	ZIP			
	Guarantor/Endorser Name		PACs and Political Parties Only)			
\dashv						
	Enter total only if last page of schedule				0	0
f	transfer total to *Summary of Receipts, line 2(a))				9	9

Schedule A(2)(a), page___of ___



FORGIVENESS ON LOANS RECEIVED:

SCHEDULE A(2)(b)

	Lender Information			Amount Forgiven	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Forgiveness Received			0
	Street Address					
1	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address					
2			·			
_	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name Date Forgiveness		Date Forgiveness Received			
	Street Address					
3	Cny	State	ZIP			
	,					
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address					
4	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
	Lender Name		Date Forgiveness Received			
	Street Address					
5	Cdy	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding		i		
	Enter total only if last page of schedule				0	0

Schedule A(2)(b), page___of ___

REPAYMENT ON LOANS MADE:

SCHEDULE A(2)(c)

	Borrower	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Г	Borrower Name		Date Repayment Received			0
	Street Address		<u></u>			
1	City	State	ZIP			
			<u> </u>			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name	ļ	Date Repayment Received			
	Streel Address					
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	<u> </u>			
	Borrower Name	1	Date Repayment Received			
	Street Address					
3	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name Date Repayment Received					
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
		•				
	Borrower Name		Date Repayment Received			
	Street Address	-				
5	City	State	ZIP		}	
	Original Amount Borrowed	Amount Still Outstanding				
\dashv	Enter total only if last page of schedule				0	0
	(transfer total to *Summary of Receipts,* line 2(c))	U	0			

Schedule A(2)(c), page___of ___



INTEREST ACCRUED ON LOANS MADE:

SCHEDULE A(2)(d)

	Вогтоwer	Amount of Interest Accrued	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
Г	Borrower Name		Date Interest Accrued			0
	Street Address			-		
1	City	State	ZIP	1		
			NOTE OF			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			
	Street Address		·			
2	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	_			
	Borrower Name Date		Date Interest Accrued			
	Street Address					
3	Спу	State	ZIP	ĺ		
	Original Amount Borrowed	Amount Still Outstanding	I		ĺ	
_	Borrower Name Date Interest Accrued					
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Borrower Name		Date Interest Accrued			<u>.</u>
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Enter total only if last page of schedule	Enter total only if last page of schedule			0	0

Schedule A(2)(d), page____of ____



REBATES AND REFUNDS RECEIVED:

SCHEDULE A(3)

	Payor Information			Amount Rebated or Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Г	Payor Name		Date Rebate/Refund Received			0
	Street Address				0	
1	City	State	ZIP	1		
	·				i	
	Original Purchase Amount	Reason for Refund/Rebat				
Γ	Borrower Name	1	Date Rebate/Refund Received			
	Street Address					
2	Слу	State	21P	1		
	Original Purchase Amount	Reason for Refund/Rebate				
	Borrower Name Date Rebate/Refund Received			<u> </u>		_
	Street Address				i	
3	Сяу	State	ZiP			
	Original Purchase Amount	Reason for Refund/Rebate				
	Borrower Name Date Rebate/Refund Received					:
	Street Address					
4	City	State	ZIP			i
	Original Purchase Amount	Reason for Refund/Rebate				
	Borrower Name		Date Rebate/Refund Received			
	Street Address					
5	Спу	State	ZIP			
	Original Purchase Amount	Reason for Refund/Rebate				
	Enter total only if last page of schedule				0	0

Schedule A(3), page____of ____



INTEREST ACCRUED ON COMMITTEE MONIES:

SCHEDULE A(4)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Account with Interest Earned (Bank Name / Type of Account)	0	0
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Account with Interest Earned (Bank Name / Type of Account)		
Total (transfer total to "Summary of Receipts," line 4)	0	0

Schedule A(4), page____of ____



IN-KIND CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - MORE THAN \$50 DURING ELECTION CYCLE:*

SCHEDULE A(5)(a)

_	Individual Cont	ributor Informatio	n	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			0
	Street Address		<u> </u>			
1	Сйу	State	ZIP	1		
	Occupation	Employer				
Γ	Name	•	Date In-Kind Contribution Received			
	Street Address	_				
2	City	State	ZIP			
-	Occupation	Employer				i
	Name		Date In-Kind Contribution Received			
	Street Address					
3	Спу	State	ZIP			
	Occupation	Employer			ŀ	
	Name	I	Date In-Kind Contribution Received			
	Street Address					
4	City	State	ZIP			
	Оссирабоя	Employer			į	
	Name		Date In-Kind Contribution Received		-	
	Street Address	Street Address				
5	Сиу	State	ZIP			
	Occupation	Employer				
	Enter total only if last page of schedule	<u> </u>			0	0

Schedule A(5), page___of

^{*}If in-kind contributions of \$50 or less are listed on Schedule A(5)(b), do not include them on Schedule A(5)(a).



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IN-KIND CONTRIBUTIONS RECEIVED FROM INDIVIDUALS - \$50 OR LESS (AGGREGATE):*

SCHEDULE A(5)(b)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	0	0
Cumulative In-Kind Contributions from Individuals - \$50 or Less		
Enter total only if last page of schedule (transfer total to "Summary of Receipts," line 1(b))	0	0

IN-KIND CONTRIBUTIONS FROM CANDIDATE COMMITTEES: SCHEDULE A(5)(c)

_	Candidate Committee	Contributor Info	rmation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					0
	Street Address					
1	City	State	ZIP		,	
	Committee ID Number	Data la Wad Ocataba da	5			
	Communication volumes	Date In-Kind Contribution	Kecelved			
H	Committee Name					
2	Street Address					
	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
3	Street Address					
	Спу	State	ZIP			
			-"		,	
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
4	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
5						
١	Слу	State	ZIP			
	Committee ID Number	Date In-Kind Contribution I	Received			
	Enter total only if last page of schedule		0	0		

Schedule A(5)(c), page___of ___



IN-KIND CONTRIBUTIONS FROM POLITICAL ACTION COMMITTEES:

SCHEDULE A(5)(d)

_	Political Action Commit	tee Contributor In	formation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
ı	Committee Name					0
	Street Address					
1	Спу	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
H	Committee Name		.			
	Street Address					
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
	Committee Name					
	Street Address					
3	Спу	State	ZIP			
	Committee ID Number Date In-Kind Contribution Received					
	Committee Name					
	Street Address					
4	Сиу	State	ZIP			
	Committee ID Number Date In-Kind Contribution Received					
	Committee Name		<u>. </u>			
	Street Address	-				
5	Спу	State	ZIP			
	Committee ID Number Date In-Kind Contribution Received					
	Enter total only if last page of schedule (transfer total to "Summary of Receipts," line 5(d1))		0	0		

Schedule A(5)(d), page___of ___

IN-KIND CONTRIBUTIONS FROM POLITICAL PARTIES:

SCHEDULE A(5)(e)

	Political Party Co	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Committee Name	Committee Name				0
	Street Address	Street Address				
1	City	State	ZIP			
	Committee (D Number	Date In-Kind Contribution	Received	1		
_						
	Committee Name					
	Street Address					
	38 881 - 1001 1023					
2	City	State	ZIP	[
				i		
	Committee ID Number	Date In-Kind Contribution Received				İ
	Committee Name					
	Street Address					
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Received			
		ļ <u>.</u>				
	Committee Name					
	Street Address					
	au ou Auguas			J		
4	Слу	State	ZIP			
					ľ	
	Committee ID Number	Date In-Kind Contribution I	Received			
	Committee Name					
	5					
	Street Address					
5	City	State	ZIP			
	,	1 1				
	Committee IO Number	Date In-Kind Contribution F	Received			
	Enter total only if last page of schedule				0	0
	(transfer total to "Summary of Receipts," line 5(e))				~	~

Schedule A(5)(e), page___of ___

IN-KIND CONTRIBUTIONS FROM PARTNERSHIPS:

SCHEDULE A(5)(f)

	Partnership Con	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Partnership Name					0
	Street Address					0
1	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
3	City	State	ZIP			
ĺ	Corporation Commission File Number	Date In-Kind Contribution Received				
_	Partnership Name					
	Partnership name			l		
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Partnership Name					
	Street Address					
5	Chy	State	ZIP			
						
	Corporation Commission File Number	Opporation Commission File Number Date In-Kind Contribution Received				
	Enter total only if last page of schedule			$\overline{}$		
(transfer total to "Summary of Receipts." line 5(f))					0	0

Schedule A(5)(f), page___of ___

IN-KIND CONTRIBUTIONS FROM CORPORATIONS AND LLCs:

SCHEDULE A(5)(g)

	Corporation / LLC (Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					0
	Street Address	Street Address				O
1	City	State	ZIP	1		
	Corporation Commission File Number Date In-Kind Contribution Received					
Г	Corporation/LLC Name					·
]		
	Street Address					
2	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received		İ	
	Corporation/LLC Name					
	Street Address	· · · · · · · · · · · · · · · · · · ·				
3	City	State	ZIP		i	
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Corporation/LLC Name					
	Street Address					
4			<u> </u>			
	City	State	ZIP			
	Corporation Commission File Number Date In-Kind Contribution Received					
	Corporation/LLC Name				-	
	Street Address					
5	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution Received				
	Enter total only if last page of schedule				0	0
	(transfer total to "Summary of Receipts," line 5(g))		~	~		

Schedule A(5)(g), page____of ___



IN-KIND CONTRIBUTIONS FROM LABOR ORGANIZATIONS:

SCHEDULE A(5)(h)

	Labor Organization	Contributor Inform	nation	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					0
	Street Address					
1	Слу	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
Г	Labor Organization Name					
	Street Address		<u> </u>			
2	Спу	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name			-		
	Street Address					
3	City	State	ZIP			
	Corporation Commission File Number Date In-Kind Contribution Received					
	Labor Organization Name					
	Street Address					
4	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Received			
	Labor Organization Name		-			
	Street Address					
5	Cay	State	ZIP			Ì
	Corporation Commission File Number Date In-Kind Contribution Received					
	Enter total only if last page of schedule		0	0		

Schedule A(5)(h), page____of ___



IN-KIND CONTRIBUTIONS FROM CANDIDATE'S PERSONAL ASSETS OR PROPERTY:

SCHEDULE A(5)(i)

	Candidate Information			Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name		Date In-Kind Contribution Received			0
	Street Address					U
ĺ	Substitutions					
1	City	State	ZIP	{		
		•				
	Asset or Property Contributed	·	1	1	;	
L						
	Name		Date In-Kind Contribution Received	i		
	Street Address				' I	
	OR DOLL WITHOUT					
2	City	State	ZIP			8
	Asset or Property Contributed					
					_	
	Name		Date In-Kind Contribution Received			
	Street Address					
3	City	State	ZIP			
	Asset or Property Contributed					
	Name Date In-Kind Contribution Received					
	Street Address					
4	City	State	ZIP			
	Asset or Property Contributed					
_						
	Name		Date In-Kind Contribution Received			
	Street Address					
5	Cny	State	ZIP			
	Asset or Property Contributed					
_						
	Enter total only if last page of schedule				0	0
	(transfer total to "Summary of Receipts," line 5(i))					

Schedule A(5)(i), page____of ___



In-Kind Donations Received (Non-Contributions) (PACs and Political Parties Only):

SCHEDULE A(6)

	Source	Amount Received	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name		Date In-Kind Donation Received			0
	Street Address					U
					j	
1	City	State	ZIP		!	
	Type of Item Donated	J				
	Name		Oate In-Kind Donation Received	-		
	Street Address	<u></u> .				
2						
_	Сиу	State	ZIP			
	Type of Item Donated					
	Name Date In-Kind Donation Receive		Date In-Kind Donation Received			
	Street Address					
3			 -			
	City	State	ZIP			
	Type of Item Donated					
	Name		Date In-Kind Donation Received			
	Street Address					
4	City	State	ZIP			
	Type of Item Donated					
	Name Date In-Kind		Date In-Kind Donation Received			
	Stroet Address					
5	City	State	ZIP			
	Type of Item Donated					
	Enter total only if last page of schedule				0	0

Schedule A(6), page___of ___

EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(a)

	Creditor Information			Amount of Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name	_	· · ·			0
	Street Address	-				
1	City	State	ZIP			
	Services or Goods Provided on Credit		Date of Extension of Credit			
	Name		•			
	Street Address					
2	Cay	State	ZIP			
	Services or Goods Provided on Credit	Date of Extension of Credit			1	
	Name					
	Street Address					
3	City	State	ZIP	i		
	Services or Goods Provided on Credit Date of Extension of Credit					
	Name					-
	Street Address					
4	Спу	State	ZIP			
	Services or Goods Provided on Credit Date of Extension of Credit					
	Name					
	Street Address					
5	Crty	State	ZIP			
	Services or Goods Provided on Credit Date of Extension of Credit					
	Enter total only if last page of schedule				0	0

Schedule A(7(a), page___of ___



PAYMENTS ON EXTENSIONS OF CREDIT RECEIVED:

SCHEDULE A(7)(b)

	Creditor Information			Payment Amount on Credit Extended	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name					0
	Street Address					
1	Cny	State	ZIP			
		<u> </u>				
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
-	Name	<u>.</u>				
	Street Address			İ		
2	City	State	ZIP			
	Services or Goods Originally Provided on Credit		Date of Original Extension of Credit			
	Name					
	Street Address					
3	Сіту	la: .	I			
	City	State	ZIP			
	Services or Goods Originally Provided on Credit Date of Original Extension of Credit					
	Name					
	Street Address					
4	City	State	ŽIP			
	Services or Goods Originally Provided on Credit Date of Original Extension of Credit				;	
	Name					
	Street Address					
5				i i		
	City	State	ZIP			
	Services or Goods Originally Provided on Credit Date of Original Extension of Credit					
\dashv	Enter total only if last page of schedule				0	
	(transfer total to "Summary of Receipts," line 7(b))				0_	0

Schedule A(7)(b), page____of ___



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JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS RECEIVED:

SCHEDULE A(8)

_	Payor Comm	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Committee Name		Payment Date			0
	Street Address			-		O
1	City	State	ZIP	1		
				J		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense	if applicable)			
<u> </u>	Committee Name		Payment Date			
			,			
	Street Address		<u> </u>	1		
۱						
2	Сяу	State	ZIP			
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if annicable)			
	1 ypo w one red Expense (- предоставительной предоставительном предостави			
Г	Committee Name		Payment Date			
	Street Address					
3	City	State	ZIP			
	, i					
	Date of Joint Fundraising Event (# applicable) Type of Shared Expense (#		if applicable)			
	Consider None	,	la .a.			
	Committee Name		Payment Date			i
	Street Address					
4	City	State	ZIP			
İ	Date of Joint Fundraising Event (if applicable) Type of Shared Expense (if		appicable)			
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP			
	•••	J				
	Oate of Joint Fundraising Event (if applicable)	Type of Shared Expense (i	f applicable)			
	Enter total only if last page of schedule				0	0
	(transfer total to "Summary of Receipts," line 8)			-		

Schedule A(8), page____of ___



PAYMENTS RECEIVED FOR GOODS/SERVICES:

SCHEDULE A(9)

	Payor II	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Name					0
	Street Address					
1	City	State	ZIP			
	Services or Goods Purchased		Payment Date			
	Name					
	Street Address					
2	Сиу	State	21P			
	Services or Goods Purchased	l	Payment Date			
	Name					
	Street Address					
3	City	State	ZIP			
	Services or Goods Purchased Payment Date					
	Name					
	Street Address					
4	City	State	ZIP			
	Services or Goods Purchased Payment Date					
	Name					
	Street Address					
5	City	State	ZIP			
	Services or Goods Purchased Payment Date					
	Enter total only if last page of schedule				0	0

Schedule A(9), page____of ___



OUTSTANDING ACCOUNTS RECEIVABLE / DEBTS OWED TO COMMITTEE:

SCHEDULE A(10)

	Infor	mation		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Name			_		0
	Street Address	Street Address				
1	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
2	Спу	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Assured			
	Name					
	Street Address					
3	Cny	State	ZIP			i
	Type of Account Receivable or Debt Owed Date that Debt Accrued					
	Name					
	Street Address					
4	City	State	ZIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Name					
	Street Address					
5	Спу	State	ŽIP			
	Type of Account Receivable or Debt Owed		Date that Debt Accrued			
	Enter total only if last page of schedule		0	0		

Schedule A(10), page____of ___



TRANSFER IN SURPLUS MONIES / TRANSFER OUT DEBT:

SCHEDULE A(11)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
Source of Surplus Monies / Recipient of Transferred Debt	0	0	
Source of Surplus Monies / Recipient of Transferred Debt			
Source of Surplus Monies / Recipient of Transferred Debt			
Source of Surplus Monies / Recipient of Transferred Debt			
Source of Surplus Monies / Recipient of Transferred Debt			
Total (transfer total to "Summary of Receipts," line 11)	0	0	

MISCELLANEOUS RECEIPTS:

COMMITTEE ID NUMBER 2018-07

SCHEDULE A(12)

Source Information			Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
Γ	Name					0
	Street Address					
1	City	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
	Спу	State	ZIP			
	Receipt Type		Receipt Date			
	Name					
	Street Address					
3	Спу	State	ZIP			
	Receipt Type Receipt Date					
	Name					
4	Street Address					
	City	State	ZIP			
	Receipt Type Receipt Date					
	Name					
5	Street Address					
	City	State	ZIP			
	Receipt Type		Receipt Date			
	Enter total only if last page of schedule (transfer total to "Summary of Receipts," line 12)				0	0

Schedule A(12), page____of ___

DISBURSEMENTS FOR OPERATING EXPENSES:

SCHEDULE B(1)

	Recipient	Amount Paid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle		
	Political Lawn Signs	Oisbursement Date 8	/14/2018		\$1,389.00	\$1,389.00
	916 Byrd Avenue			\$ 1,389.00		
1	Neenah	State WI	^² 54956	□ Cash		
	Type of Operating Expense Paid Large signs		(PACs and Political Parties Only)	■ Credit		
Г	Political Lawn Signs	Disbursement Date 8	/14/2018		\$987.25	\$987.25
	Street Address 916 Byrd Avenue			\$ 987.25		
2	^{cay} Neenah	State WI	^{21P} 54956			
	Type of Operating Expense Paid Small signs	Non-Electoral Purpose? ((PACs and Political Parties Only)	☐ Cash ☐ Credit		
	Name	Disbursement Date				
	Street Address			-		
3	Сіту	State	ZIP	-		į
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Cash ☐ Credit		
	Name	Disbursement Date	· ·			
	Street Address			-		
4	Спу	State	ZIP			
	Type of Operating Expense Paid		PACs and Political Parties Only)	□ Cash □ Credit		
	Name	Disbursement Date	<u> </u>			
	Street Address					
5	City	State ZIP		☐ Cash		
	Type of Operating Expense Paid	Non-Electoral Purpose? (PACs and Political Parties Only)		☐ Credit		
- 1	Enter total only if last page of schedule		\$2,376.25	\$2,376.25		

Schedule B(1), page____of ___

MONETARY CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(2)(a)

	Candidate Committe	ee Recipient Infon	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name None				0	0
	Street Address			-		
1	City	State	ZIP	1		
	Committee ID Number	Date Contribution Made	<u> </u>	☐ Cash☐ Credit		
Г	Committee Name					
	Street Address					
2	Спу	State	ZIP	1		
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
	Committee Name					
	Street Address					
3	City	State	ZIP]		
	Committee ID Number	Date Contribution Made		☐ Cash ☐ Credit		
Г	Committee Name					
	Street Address					
4	City	State	ZIP	50		
	Committee ID Number	Date Contribution Made	-	☐ Cash ☐ Credit		
	Committee Name		-			
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash ☐ Credit		
	Enter total only if last page of schedule (transfer total to "Summary of Disbursements," line 2(a))	·			0	0

Schedule B(2)(a), page____of ___

2018-07

MONETARY CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES

SCHEDULE B(2)(b)

_	Political Action Commi	ttee Recipient Inf	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name NONE		0	0		
	Street Address		<u>-</u>	-		
1	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash ☐ Credit		
L						
	Committee Name					
	Street Address					
Ĺ						
2	Сйу	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash ☐ Credit		
				2 0/0411		
	Committee Name					8
	Street Address					
3						
3	City	State	ZIP			
	Committee ID Number	Date Contribution Made		□ Cash □ Credit		
_					<u>.</u>	
1	Committee Name					
	Street Address					
4		r				
,	City	State	ZIP			
	Committee (D Number	Date Contribution Made		☐ Cash ☐ Credit		
	Committee Name					
	Street Address					
5	City	<u></u>				
	Опу	State	ŻIP	E Coat		
	Committee ID Number	Date Contribution Made		☐ Cash ☐ Credit		
_						
	Enter total only if last page of schedule					0

Schedule B(2)(b), page____of ___

MONETARY CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(2)(c)

_	Political Party R	ecipient Informati	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name NONE		0	0		
	Street Address	<u></u>				
١.						
1	City	State	ZIP			
	Committee ID Number	D. C. 17 C. 14 1		☐ Cash		
	Collegia de Mandel	Date Contribution Made		☐ Credit		
H	Committee Name					
	Street Address					
2	City	Ta	la _n			
	City	State	ZIP			
	Committee ID Number	Date Contribution Made		☐ Cash ☐ Credit		
L						
	Committee Name			;		
	Street Address					
						J
3	Сиу	State	ZIP			
	C			☐ Cash		
	Committee ID Number Date Contribution Made			☐ Credit		
	Committee Name					
ı	Street Address					
4	City	State	ZIP			
		State	1417			
	Committee ID Number	Date Contribution Made		☐ Cash ☐ Credit		
	Committee Name					
	Street Address		İ			
			!			
5	City	State	ZIP			
				□ Cash		ľ
	Committee ID Number	Date Contribution Made		□ Credit		
	Enter total only if last page of schedule				0	$\overline{}$
	(transfer total to "Summary of Disbursements," line 2(c))					0

Schedule B(2)(c), page___of ___

MONETARY CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(2)(d)

	 	cipient Informatio	n	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name none				0	0
	Street Address					
١.						
1	Сиу		ZIP			
	Corporation Commission File Number			□ Cash		
				☐ Credit		
Г	Partnership Name					<u> </u>
	Street Address					
2	City		ZIP			
				☐ Cash		
	Corporation Commission File Number			☐ Credit		
	Partnership Name					
	Street Address					
3	City	<u> </u>	ZIP			
	Su,		Lir	E Cook		
	Corporation Commission File Number			□ Cash□ Credit		
	Destruction bloom		<u> </u>			
	Partnership Name					
	Street Address					
4		,				
7	City		2IP			
	Corporation Commission File Number		<u></u>	☐ Cash ☐ Credit		
	Partnership Name					
	Street Address			J	Ì	:
5	Сйу	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		☐ Cash		
	CONTROL SECTION OF THE SECTION	Sera Commonition Wade		☐ Credit		
	Enter total only if last page of schedule				0	0
	(transfer total to "Summary of Disbursements," line 2(d))				U	U

Schedule B(2)(d), page___of ___

MONETARY CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(2)(e)

	Corporation / LLC	Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name				0	0
	Street Address				0	O
1	City		ZIP	□ Cash		
	Corporation Commission File Number			☐ Credit		
Г	Corporation/LLC Name					
	Street Address					
2	Слу		ZIP	50.		
	Corporation Commission File Number			□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
3	Сйу		ZIP			
	Corporation Commission File Number			□ Cash □ Credit		
	Corporation/LLC Name					
	Street Address					
4	City		ZIP	□ Cash		
	Corporation Commission File Number			☐ Credit		
	Corporation/LLC Name					
	Street Address	Street Address				
5	Спу	State	ZIP	II Cook		
	Corporation Commission File Number	Date Contribution Made		☐ Cash ☐ Credit		
	Enter total only if last page of schedule (transfer total to "Summary of Disbursements," line 2(e))					0

Schedule B(2)(e), page____of ___



MONETARY CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(2)(f)

	Labor Organizatior	n Recipient Inform	nation	Amount Contributor	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name NONE				0	0
	Street Address			1		
1		Т.	1			
ľ	City		ZIP			
	Corporation Commission File Number			- □ Cash □ Credit		
Г	Labor Organization Name					
	Street Address					
2	City		ZIP			
	Corporation Commission File Number			□ Cash □ Credit		
	Labor Organization Name					
	Sireet Address					
3	Спу		ZIP			
	Corporation Commission File Number			□ Cash □ Credit		
	Labor Organization Name	abor Organization Name				
	Street Address					
4	City		ZIP			
	Corporation Commission File Number			□ Cash □ Credit		
	Labor Organization Name			-		
	Street Address	Street Address				
5	City	State	ZIP			
	Corporation Commission File Number	Date Contribution Made		□ Cash □ Credit		
	Enter total only if last page of schedule (transfer total to "Summary of Disbursements." line 2(f))					0

Schedule B(2)(f), page___of ___

COMMITTEE ID NUMBER

LOANS MADE:

SCHEDULE B(3)(a)

		Information		Amount Loaned	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name					0
	none					10
	Street Address					
L			_			
1	City	State	ZIP			
l						
l	Guaranter/Endorser Name	Date Loan Made				
\vdash	Borrower Name					
	Street Address		i			
2	City	la	lan			
-	Cry	State	ZIP			
	Guarantor/Endorser Name	Date Loan Made				
	Borrower Name					
	Street Address					
3	City	State	ZIP			
		1				
	Guarantor/Endorser Name	Date Loan Made	<u> </u>			
	Borrower Name					
	Street Address					
4	City	State	ZIP			
			J-"			
	Guarantor/Endorser Name	Date Loan Made				
	Continuor green and registry	Date Coall Made				
\dashv	Borrower Name					
	bortower Name					
		 -				
	Street Address				ļ	
5						
٦	City	State	ZIP			
	Guarantor/Endorser Name	Dale Loan Made				
	Enter total only if last page of schedule				0	
	(transfer total to "Summary of Receipts." line 3)				0	0

Schedule B(3)(a), page___of ___of

LOAN GUARANTEES MADE:

COMMITTEE ID NUMBER 2018-07

SCHEDULE B(3)(b)

	Guaranto	r Information		Amount Guaranteed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Guarantor Name					
	none				•	0
	Strool Address					
1	City	State	ZiP			
	Borrower Name	Date Loan Guaranteed				
_	Guarantor Name					
	Sireet Address					
2	City	City	City			
	Borrower Name	Borrower Name				
	Guarantor Name					
	Street Address					
3	City	City	City			
	Borrower Name	Borrower Name				
	Guarentor Name				,,,	
	Street Address					
4	City	Сйу	Спу			
	Borrower Name	Borrower Name				
	Guarantor Name	l				
	Street Address					
5	City	City	Сйу			
ŀ	Borrower Name	Borrower Name				
	Enter total only if last page of schedule		0	0		

Schedule 8(3)(b), page____of ____

FORGIVENESS ON LOANS MADE:

SCHEDULE B(3)(c)

	Borrower Information				Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Borrower Name		Date Forgiveness Made			
	none					0
	Street Address					
1	Сііу	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
Г	Borrower Name	·	Date Forgiveness Made			
	Street Address					
2	Cay	State	ZIP			
			İ			
	Original Amount of Loan	Amount Still Outstanding				
	Borrower Name		Date Forgiveness Made			
	Street Address					
3	City	State	ZIP			
						i
	Original Amount of Loan	Amount Still Outstanding				
	-					
	Borrower Name	Date Forgiveness Made				
	Street Address					
4			1			
Ì	City	State	ZIP			
	Original Amount of Loan	Amount Still Outstanding				
\dashv	Borrower Name	<u> </u>	Date Forgiveness Made			
	DOTONE Plante		Date Folgiveness Made			
	Street Address					
5	City	State	ZIP			
			-			
	Original Amount of Loan	Amount Still Outstanding	·	:		
	-					
\dashv	Enter total only if last page of schedule		1			
	(transfer total to "Summary of Disbursements." line 3(c))				0	0

Schedule B(3)(c), page____of ____

REPAYMENT ON LOANS RECEIVED:

SCHEDULE B(3)(d)

	Lender I	Information		Amount Repaid	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Г	Lender Name		Date Repayment Made			
	none					0
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
_	Lender Name		Date Repayment Made			
	Street Address					
2	City	State	ZIP			
	Original Amount Borrowed Amount Still Outstanding		L			
	Lender Name		Date Repayment Made			
				i		
	Street Address		<u> </u>			
3	City	State	ZIP		ļ	
	·					
	Original Amount Borrowed	Amount Still Outstanding	<u> </u>			
	Lender Name Date Repayment Made					-
	Street Address					
4	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Repayment Made			
	Street Address					
5	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding		ļ		
	Enter total only if last page of schedule					
	(transfer total to "Summary of Disbursements." line 3(d))				0	0

Schedule B(3)(d), page____of

INTEREST ACCRUED ON LOANS RECEIVED:

SCHEDULE B(3)(e)

	Lender Information				Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Lender Name		Date Interest Accrued			0
	none					U
	Street Address					
1	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding	t			
	Lender Name		Date Interest Accrued			
						,
	Street Address			ļ		
2	2.	la	I	1		
_	City	State	ZIP			
	Original Amount Borrowed Amount Still Outstanding		I			
	Lender Name		Date Interest Accrued			
3					ı	
	Street Address					
		1_	I			
	City	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name Date Interest Accrued					
	<u>.</u>					
	Street Address					
4	City	State	ZiP			
	Oity	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding				
	Lender Name		Date Interest Accrued			
	Street Address					
5	City	State	ZIP			
	Oily	State	ZIP			
	Original Amount Borrowed	Amount Still Outstanding]		
\exists	Enter total only if last page of schedule	_			0	0
	(transfer total to *Summary of Disbursements, * line 3(e))					0

Schedule B(3)(e), page___of

REBATES AND REFUNDS MADE (NON-CONTRIBUTIONS):

SCHEDULE B(4)

	Re	cipient Information		Amount Rebated / Refunded	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Г	Name of Original Payor		Date Rebate/Refund Made			
	none	10				
ı	Street Address					
1	City	Tour	T and			
	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment	-	İ	
r	Name of Original Payor		Date Rebate/Refund Made			
	Street Address					
2	City	State	ZIP	1		
	Corporation Commission File Number (if applicable)	Original Payment Amount	Date of Original Payment	1		
	Name of Original Payor	<u> </u>	Date Rebate/Refund Made			
	Street Address					
3	Сяу	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Name of Original Payor	1	Date Rebate/Refund Made			
	Street Address					
4	Сяу	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Name of Original Payor	-	Date Rebete/Refund Made			
	Street Address		•			
5	City	State	ZIP			
	Corporation Commission File Number (if applicable)	Original Payment Amount	Name of Original Payor			
	Enter total only if last page of sche (transfer total to "Summary of Disbursements," line 4)	dule			0	0

Schedule B(4), page____of

IN-KIND CONTRIBUTIONS TO CANDIDATE COMMITTEES:

SCHEDULE B(5)(a)

	Candidate Committe	e Recipient Inform	mation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name		·			
	none					0
	Street Address					
١,						
1	City	State	ZIP			
		_				
	Committee ID Number	Date In-Kind Contribution	Made			
L			X			
	Committee Name					
	Street Address					
_			,···]		
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution Made]		
	Committee Name					
					l	
	Street Address					
3						
ľ	City	State	ZIP			
	Committee ID No. 10	0-1-1-W-10-10-V				
	Committee ID Number Date In-Kind Contribution Made					
	Committee Name	<u> </u>				
	Committee Name					
	Street Address				l i	
	Sulest Address					
4	Сйу	State	ZIP			
	,					
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name	I				
						ĺ
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution I	Made			
	Enter total only if last page of schedule				0	
	(transfer total to "Summary of Disbursements," line 5(a))				0	0

Schedule B(5)(a), page____of ___



IN-KIND CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES:

SCHEDULE B(5)(b)

	Political Action Commit	ttee Recipient Info	ormation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Committee Name					
	none					0
	Street Address					
1	City	State	ZIP			
					l i	
	Committee ID Number	Committee ID Number Date In-Kind Contribution Made				
					!	
L		<u> </u>				
	Committee Name					
	Street Address				i	
2	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
		Deta an Para Continuation	Continuation Made			
<u> </u>	-	l				
	Committee Name				l i	
3	Street Address					
						l
	Cny	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
ĺ						
	Committee Name					
	Committee Name					
	Street Address					
4	City	State	ZIP			
				'		
	Committee ID Number	Date In-Kind Contribution	Made			
	Committee Name					
	Strad Address					
	Suppl Address		-	ľ		
5						
Ĭ	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution I	Made		200	
					20	
	Enter total only if last page of schedule					
	Enter total only if last page of schedule (transfer total to "Summary of Disbursements," line 5(b))				0	0

Schedule B(5)(b), page___of ___

IN-KIND CONTRIBUTIONS TO POLITICAL PARTIES:

SCHEDULE B(5)(c)

	Political Party Ro	ecipient Informati	on	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Г	Committee Name					
	none			j		0
	Street Address]		
<u>ا</u>		,			-	
 	City	State	ZIP			
			<u> </u>			
	Committee ID Number	Date In-Kind Contribution	Made			
L						
	Committee Name					
	Street Address				[
	Street Address					
2	Слу	I	I _{no}	1		
	Cny	State	ZIP			
	Committee ID Number Date In-Kind Contribution Made		-			
		Date III Tana Germanian	***************************************			
┝	Committee Name	<u> </u>				
	Street Address	-				
3	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
						[
	Committee Name					
	Street Address					
4						
7	Сау	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
\vdash	Committee Name					
	Street Address					
5	City	State	ZIP			
	Committee ID Number	Date In-Kind Contribution	Made			
	Enter total only if last page of schedule				0	
	(transfer total to "Summary of Disbursements," line 5(c), columns	A and B)			0	0

Schedule B(5)(c), page____of ____

IN-KIND CONTRIBUTIONS TO PARTNERSHIPS:

SCHEDULE B(5)(d)

	Partnership Red	cipient Informatio	n	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Partnership Name					
	none			J	ļ	0
	Street Address	Street Address				
1	City	State	ZIP			
	Corporation Commission File Number Date In-Kind Contribution Made		1			
	Partnership Name			· -		
				1		
	Street Address					
2	Cay	State	ZIP		!	
		ļ				
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Partnership Name					
3	Street Address					
	City	State	ZIP			
	į –					
	Corporation Commission File Number	Date In-Kind Contribution	Made			
_	Partnership Name	<u> </u>				
	r and any country					
	Street Address					
	0.0017001000					
4	City	State	ZIP	•		
	Corporation Commission File Number	Date In-Kind Contribution	Made			
┪	Partnership Name			<u> </u>		
	Street Address	Circuit Address				
	Street Address					
5	City	State	ZIP			
		Jaco				
	Corporation Commission File Number	Date In-Kind Contribution I	Made			
		Date or talks Contribution I				
\dashv	Enter total publications of sales 4.4	<u> </u>				
	Enter total only if last page of schedule (transfer total to "Summary of Disbursements," line 5(d))				0	0

Schedule B(5)(d), page___of ___



IN-KIND CONTRIBUTIONS TO CORPORATIONS AND LLCs:

SCHEDULE B(5)(e)

_	Corporation / LLC	Recipient Informa	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Corporation/LLC Name					0
	none					0
	Street Address				ļ	
L						
1	City	State	ZIP			
						,
	Corporation Commission File Number	Date In-Kind Contribution	Made			·
					!	
	Corporation/LLC Name	·	-			
	Street Address					
2	City	State	ZIP			
		1	ľ			
	Corporation Commission File Number	ion File Number Date In-Kind Contribution Made				
	Corporation/LLC Name		-			
					l	
3	Street Address				ľ	
	City	State	ZIP			
			-"			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Corporation/LLC Name	<u> </u>				
	Conpositivite Citame					
	Street Address					
4	City	State	ZIP			
		J				
	Corporation Commission File Number	Date In-Kind Contribution	Made			
		Date in Turn Communication				
	Corporation/LLC Name					
	Сиривничесь пате					
	Street Address					
5	City	State	ZIP			
	,		E"			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	anihmmen Antimototi Lia izagioa	Cara analis Couthbrigal (mout			
-	Entertate land of the control of the					
	Enter total only if last page of schedule				0	0

Schedule B(5)(e), page___of ___



IN-KIND CONTRIBUTIONS TO LABOR ORGANIZATIONS:

SCHEDULE B(5)(f)

	Labor Organization	Recipient Inform	ation	Amount Contributed	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Labor Organization Name					0
	none					0
	Street Address					
1	City	State	ZIP			
					·	
	Corporation Commission File Number	Date In-Kind Contribution	Made			i
	Labor Organization Name			<u> </u>		
					ľ	
	Street Address					
2	City	State	ZIP			
			(35)			
	Corporation Commission Fife Number Date In-Kind Contribution Made					
	30 %					
	Labor Organization Name					
	30 11° 30 H-104 80°			i		
3	Street Address					
	City	State	ZIP			
	Corporation Commission File Number	Date In-Kind Contribution	Made			
	Labor Organization Name	<u>. </u>				
	- Company (Control of Control of					
	Street Address					
4	City	State	ZIP			
	,					
	Corporation Commission File Number	Date In-Kind Contribution	Lane.			
	•					
	Labor Organization Name		-		<u> </u>	
	Laboi Organization NAMB					
	Strant Ardraes					
	Street Address				- 1	
5	City	State	ZIP			
		0.2.0	211			
	Corporation Commission File Number	Date In-Kind Contribution	Maria			
		On the state of th				
\dashv	Patradad anh (filast as as af a 1 - 1 - 1		[
	Enter total only if last page of schedule (transfer total to "Summary of Disbursements," line 5(f))				0	0

Schedule B(5)(f), page___of ___

INDEPENDENT EXPENDITURES MADE:

SCHEDULE B(6)

	Expenditure (Recipient Informati	ion	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Г	Recipient Name		Mode of Advertising (TV, mail, etc)			
	none			4		0
	Street Address					
	City State		ZIP	-		
1	5.17	Ciaro	2.17			
	Candidate(s) Supported (including % supported) Candidate(s) Opposed (inclu		duding % opposed)			
				☐ Cash ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
⊢	Recipient Name	<u>i</u>	Mode of Advertising (TV, mail, etc)			
	Trocposit (viii)		Mode of Advertising (1 v. mail, etc)			
	Street Address		<u> </u>	1		
	Cay	State	ZIP	1		
2						
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (incl	uding % opposed)	1		
				□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		□ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
	Surpor Adultess					
	City	State	ZIP	1		
3]		
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (incl	uding % opposed)]		
				☐ Cash - ☐ Credit		
	Date of First Publication, Display, Delivery, or Broadcast	Election Manth/Year				
	Recipient Name	l	Mode of Advertising (TV, mail, etc)			
	Street Address					
	City	State	ZIP			
4	Vay	GIEIG	E.IF			
	Candidate(s) Supported (including % supported)	Candidate(s) Opposed (incli	uding % opposed)	1		
		amountally opposed functions is objusted)		□ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Efection Month/Year	Office Sought	☐ Credit		
	Enter total only if last page of schedule					
	(transfer total to "Summary of Disbursements," line 6)	-			0	0

Schedule B(6), page____of ____

BALLOT MEASURE EXPENDITURES MADE:

SCHEDULE B(7)

_	Expenditure 8	Recipient Informatio	n	Expenditure Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
l	Recipient Name		Mode of Advertising (TV, mail, etc)			0
	none					0
	Street Address		-			
	City	State		1		
1						
ĺ	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed (i	including % opposed)	-		
		, , , ,	• ,, ,	☐ Cash		
	Detect Sint College Districts	FI 11 44		☐ Credit		
ı	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				
L						
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address			1		
	City	State	ZIP	1		
2						
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed (including % opposed)		1		
		, , , , , , , , , , , , , , , , , , , ,		☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year		☐ Credit		
	Sull St 1 St Sullesse, Supray Startery, of Stonessesses	Clouist mores toar		1		ĺ
_	Decision there		L	<u> </u>		
	Recipient Name		Mode of Advertising (TV mail, etc)			
				ļ		
	Street Address					
_	City	State	ZIP			
3						
	Ballot Measure(s) Supported (including % supported)	Ballot Measure(s) Opposed (in	ncluding % opposed)	1	İ	
				☐ Cash		
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year	· · · · · · · · · · · · · · · · · · ·	☐ Credit		
	Recipient Name		Mode of Advertising (TV, mail, etc)			
	Street Address		<u> </u>		i	
	Ph	In.	ZIP			
4	City	State	ZIP .			1
[
	Ballot Measure(s) Supported (including % supported)	Battot Measure(s) Opposed (in	ncluding % opposed)			
				☐ Cash ☐ Credit		ļ
	Date of First Publication, Display, Delivery, or Broadcast	Election Month/Year				į
	Enter total only if last page of each did-					
- 1	Enter total only if last page of schedule (transfer total to *Summary of Disbursements,* line 7.)	•			0	0 1
- 1	manus was to comment to discussioning (1,)				- 1	-

Schedule B(7), page___of ___

RECALL EXPENDITURES MADE:

COMMITTEE ID NUMBER 2018-07

SCHEDULE B(8)

Recipient Name NONE Street Address City State ZIP Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled	
Street Address City State ZIP Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled	
City Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled	
Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled	
Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled	
□ Cash	
Date of First Publication, Display, Delivery, or Broadcast Office Held	
Recipient Name Mode of Advertising (TV_ mail_etc)	
Private Addition	
Street Address	
City State ZIP	
Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled	
□ Cash □ Credit	
Date of First Publication, Display, Defivery, or Broadcast Office Held	
Recipient Name Mode of Advertising (TV, mail, etc)	İ
Street Address	
City State	
3	
Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled	
□ Cash □ Credit	
Date of First Publication, Display, Delivery, or Broadcast Office Held	
Recipient Name Mode of Advertising (TV, mail, etc)	
Street Address	
City State ZIP	
Supporting or Opposing Issuance of Recall Order? Candidate Sought to be Recalled	
☐ Cash	
Date of First Publication, Display, Delivery, or Broadcast Office Held	
Enter total only if last page of schedule	
(transfer total only if last page of schedule (transfer total to "Summary of Disbursements," line 8.)	0 l

Schedule 8(8), page____of ___

SUPPORT PROVIDED TO PARTY NOMINEES (POLITICAL PARTIES ONLY):

SCHEDULE B(9)

	Benefit	ted Candidate		Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
	Candidate Name		Date Benefit Provided		1	0
1	none		<u> </u>	1		U
	Street Address					II
l	City	State	ZIP	1		
1						
	Type of Benefit Provided	-	<u> </u>	1		
			<u>.</u>			
l	Notes:					
┝	Candidate Name	· · ·	Date Benefit Provided			
			Data Destain (197126)			
	Street Address		<u>. </u>	i		
2	City	State	ZIP			
֡֡֡	Type of Benefit Provided					
	Notes:		· · · · · · · · · · · · · · · · · · ·	1		
	Candidate Name		Date Benefit Provided			
	Street Address					
	City	State	ZIP	1		
3						
	Type of Benefit Provided		`			
	Notes;					
,	11065.					
	Candidate Name		Date Sensit Provided			
	Street Address	-				
	02.	Date:				
4	City	State	ZIP			
	Type of Benefit Provided	<u></u>			ĺ	
	Notes:					
\dashv	<u> </u>	<u> </u>				
	Enter total only if last page of schedule				0	0
	(transfer total to 'Summary of Disbursements," line 9)				· ·	V

Schedule B(9), page___of ___



JOINT FUNDRAISING / SHARED EXPENSE PAYMENTS MADE:

SCHEDULE B(10)

	Recipient Com	mittee Information	ı 	Payment Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Г	Committee Name		Payment Date			"
	none					0
	Street Address					
1	City	State				
				☐ Cash		
	Date of Joint Fundraising Event (if applicable) Type of Shared Expense		if applicable)	☐ Credit		
	Committee Name	•	Payment Oate			
	Street Address					
2	,		<u> </u>			
-	Cay	State				
		7 40 45 6		□ Cash		
	Oate of Joint Fundraising Event (if applicable) Type of Shared Expense (if		т аррисавіе)	☐ Credit		
	Committee Name		Payment Date			
	Street Address					
3	City	State				
				□ Cash		
	Date of Joint Fundraising Event (# applicable)	Type of Shared Expense (i	f applicable)	☐ Credit		ļ
	Committee Name		Payment Date			
	Street Address					
	G. G. G. G. G. G. G. G. G. G. G. G. G. G					
4	Спу	State				
				☐ Cash		
	Date of Joint Fundraising Event (4 applicable)	Type of Shared Expense (if	f applicable)	☐ Credit		
	Committee Name		Payment Date			
	Street Address					
5	City	State	ZIP	-		
				☐ Cash		
	Date of Joint Fundraising Event (if applicable)	Type of Shared Expense (if	applicable)	☐ Credit		
	Enter total only if last page of schedule				0	0

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REIMBURSEMENTS MADE:

COMMITTEE ID NUMBER 2018-07

SCHEDULE B(11)

				Reimbursement Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle
Г	none					0
	Street Address			_		
1	City	ZIP				
				☐ Cash		
	Services or Goods Reimbursed			☐ Credit		
	Name					
	Street Address					
2	City		ZIP	-		
	Services or Goods Reimbursed			□ Cash		
L	Services of Groots verifications			☐ Credit		
	Name					
	Street Address					
3	City		ZIP	1		
	Services or Goods Reimbursed			☐ Cash ☐ Credit		
-	Name					
	Street Address					
4	City	· · · · · ·	ZIP	-		
				□ Cash		
	Services or Goods Reimbursød		☐ Credit			
	Name					
5	Street Address			1		
	City	State	ZIP			
	Services or Goods Reimbursed		Reimbursement Date	□ Cash □ Credit		
	Enter total only if last page of schedule (transfer total to "Summary of Disbursements," line 11)				0	0
L	primers out to Genmary of Dissussatification, with 113					

Schedule B(11), page____of ___



OUTSTANDING ACCOUNTS PAYABLE / DEBTS OWED BY COMMITTEE:

SCHEDULE B(12)

Debt Information			Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
ĺ	Name					0
	none					U
	Street Address					
1	City State		ZIP	{		
		Cialo	da II			
1	Type of Account Payable or Debt Owed	1	Date that Debt Accrued			
Г	Name					
	Street Address					
Ĺ						
2	City	State	ZIP			
	Type of Account Payable or Debt Owed		Oate that Debt Accrued			
⊩	N					
	Name					
	Street Address					
3	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued			
L						
	Name					
١,	Street Address					
4		ſ				
ľ	City	State	ZIP			
	Type of Account Payable or Debt Owed		Date that Debt Accrued		:	
	See that Star Addition					
	Name					
	Street Address					
	City	State	ZIP			
	Type of Account Payable or Debt Owed Date that Debt Accrued					
Н						
	Enter total only if last page of schedule				0	0
	(transfer total to "Summary of Receipts," line 12)					U

Schedule B(12), page____of ___



TRANSFER OUT SURPLUS MONIES / TRANSFER IN DEBT:

SCHEDULE B(13)

	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
Recipient of Surplus Monies / Source of Transferred Debt	0		
Recipient of Surplus Monies / Source of Transferred Debl			
Recipient of Surplus Monies / Source of Transferred Debt			
Recipient of Surplus Monies / Source of Transferred Debt			
Recipient of Surplus Monies / Source of Transferred Debt			
Total (transfer total to "Summary of Disbursements," line 14)	0	0	

MISCELLANEOUS DISBURSEMENTS:

SCHEDULE B(14)

Recipient Information			Amount	Cumulative Amount this Reporting Period	Cumulative Amount this Election Cycle	
	none				0	
1	Street Address					
	Cny ZIP					
		10		□ Cash		
	Disbursement Type			☐ Credit		
┝	Name					
	Street Address					
2	Сйу		ZIP]		
	Disbursement Type	<u> </u>		□ Cash □ Credit		
L						
	Name					
	Street Address					
3	City		ZIP			
	Disbursement Type			☐ Cash ☐ Credit		
	Distriction Type			Li Credit		
	Name					
	Street Address					
4	Сиу		ZIP			
	District			□ Cash		
	Disbursement Type		☐ Credit			
	Name					
	Streel Address					
	City	State	.21P	III Cook		
	Disbursement Type D		Disbursement Date	☐ Cash ☐ Credit		
	Enter total only if last page of schedule				0	0

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